IRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child? EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION	V. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period? Yes No X	Yes No	ed" Yes No	Yes No X	Yes No X	PRELIMINARY INFORMATION — ANSWER EACH OF THESE		State: Lowa	Steven Arnold King	UNITED STATES HOUSE OF REPRESENTATIVES 2008 FINANCIAL DISCLOSURE STATEMENT For 2007 Calendar Year Reporting Period
f Official Conduct and certain other "excepted trusts" need ruse, or dependent child? ctions, or liabilities of a spouse or dependent child because	ATION — ANSWER EACH C	Each question in this part appropriate schedule attach	IX. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than \$305 from one source)? If yes, complete and attach Schedule VII.	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than \$305 and not otherwise exempt)? If yes, complete and attach Schedule VI.	QUESTIONS	Termination Date:	(Daytime Telephone) Employing Office:	202-225-4426	Form A For use by Members, officers, and employees
ed trusts" need not Yes No X nt child because Yes No X	OF THESE QUESTIONS	Each question in this part must be answered and the ppropriate schedule attached for each "Yes" response.	or arrangement with Yes No X	n or before the date Yes No X	ild receive any I in the reporting Yes No	lid receive any ggregating more Yes No X		against anyone who files more than 30 days late.	U.S. HOUSE OF THE CLERK OF THE CLERK OF THE CLERK A \$200 penalty shall be assessed	2008 MAY 15 PM 3: 41	HAND DELIVERED

Name	
Steve	

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SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling \$200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding \$1,000. See examples below.

Exclude: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.

Source	1	
COLICA	Туре	Amount
	Approved Teaching Fee	\$6,000
nand	Legislative Pension	\$9,000
Civil War Roundtable (Oct. 2nd)	Spouse Speech	\$1,000
	Spouse Salary	NA
No Reportable Earned Income	∠	

SCHEDULE II — PAYMENTS MADE TO CHARITY IN LIEU OF HONORARIA Name Stave Page 3 of 9

in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official List the source, activity (i.e. speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization

								None	- magazine	ashington DC	Source
									Article	Activity	
								Aug. 13, 2007	Feb. 2, 2007	Date	
								\$500	\$3 DOD	Amount	

This page may be copied if more space is required.

BLOCK A

Asset and/or income Source

traded, st of its ac Block A. period. F reporting not self-d exceeding \$1,000 at the end of the reporting period, and (b) any other asset or sources of income which generated more than \$200 in "unearned" each as provide the value and income information on not exercised, to select the specific investments) plans (such as 401(k) plans) that are self directed income during the year. For rental property or duction of income with a fair market value instruction account (i.e., plans in which you have the power, even if ticker symbols). For **all IRAs** and other retirement names of stocks and mutual funds (do not use land, provide a complete address. Provide full Identify (a) each asset held for investment or pro-

your spo parent, o Governr less in p there is Exclude interest

optional depende or incom If you so

SP, DC, Exar

Refi)

Rest

Value of Asset **BLOCK B**

please specify the method used method other than fair market value, reporting year. If you use a valuation Indicate value of asset at close of

generated income, the value should be If an asset was sold during the reporting year and is included only because it "None."

Type of Income

BLOCK C

all other assets including all IRAs, cneck all columns that apply. For retirement plans or accounts that do Check all columns that apply. ate any income during calendar year. Check "None" if asset did not genervested, should be listed as income. indicate the type of income by checknot allow you to choose specific investments, you may write "NA." For Dividends and interest, even if reinappropriate box below.

checking the appropriate box below. vested, should be listed as income. Check "None" if no income was received. Dividends and interest, even if reinments, you may write "NA" for income. For all other assets, including all IRAs, For retirement plans or accounts that do not allow you to choose specific investindicate the category of income by A exceeding exchanges (E) sales (S), or purchases (P), asset had

\$1000 in

reporting year.

ent plans or accounts that do Indicate if the	nount of Income	BLOCK D	
Indicate if the	Transaction	BLOCK E	

			irement Fund- IPERS	Frament Fund- IPERS	ng Construction	1st Bank of Paducah, KY Accounts	Imples: Simon & Schuster	SP Mega Corp. Stock	asset in the account that exceeds the ng threshold. For retirement plans that are f-directed, name the institution holding the st and its value at the end of the reporting. For an active business that is not publicly, state the name of the business, the nature activities, and its geographic location in A. For additional information, see the tion booklet. 10
								A STATE OF THE STA	None >
		A second					Inde		\$1 - \$1,000
		(T-14-7-FF)					Indefinite		\$1,001 – \$15,000
Violentino.								×	\$15,001 + \$50,000 PT
Wilds.						×			\$50,001 - \$100,000 m \$100,001 - \$250,000
10000000					×				\$250,001 – \$500,000
			74 - 144		i i i i				\$500,001 + \$1,000,000
BORDSHALL	0 N.C. MODERN CO. DISTORE					2700,00000			\$1,000,001 - \$5,000,000 -
				10.00					\$5,000,001 - \$25,000,000 - 5
									\$25,000,001 - \$50,000,000
					1				Over\$50,000,000
	2000					Statement .			NONE
					4.			×	DIVIDENDS
MA S						×		Variety.	RENT
			*	×		ji)			INTEREST
			3404		×			×	CAPITAL GAINS
							Royalties		Other Type of Income (Specify: For Example, Partnership Income or Farm Income)
wererowa.	a atacasada sa sa sa				F-1000	946.086	accesso.	According	None –
		l likes							\$1-\$200 = 3 = 3
	\	2/14	×	×		7. 6			\$201 – \$1,000 =
					11/2			×	\$1,004 - \$2,500 \(\bar{\bar{\bar{\bar{\bar{\bar{\bar{
	10.25					Ç.			\$2,501 - \$5,000 < \$5,001 - \$15,000 \$
				7 A COLT.	*				\$15,001 - \$15,000 \(\sigma \)
									\$15,001 - \$50,000 \(\equiv \)
<u>Estisica</u>	18:32240			Mark Control		1,000	×		\$100,001 - \$1,000,000
	4.18.11.41							5.1	\$1,000,001 - \$5,000,000
anno de Carrella de la Carrella de l	200.00					Sec. 38.5		0000000	Over \$5,000,000 ≚
							1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	S (partial)	If only a portion of an asset is sold, please indicate as follows: (S) (partial) See below for example. P, S, E

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Name Steve King

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											SP, DC, JT			Con
										None		Asset and/or Income Source	BLOCK A	Continuation Sheet (II rieeded)
											None > \$1,001 - \$15,000	Year-End Value of Asset	вгоск в	
											\$25,000,001 - \$50,000,000 × Over \$50,000,000, IT NONE DIVIDENDS: RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST Other Type of Income (Specify)	Type of Income	BLOCK C	
									QUIL 1		None	Amount of Income	BLOCK D	
											m په ټه	Transaction	BLOCK E	

· SCHEDULE IV— TRANSACTIONS

Name Steve King

Page 6 of 9

														None	SP Example: Mega Coporation Common Stock (partial sale)	JT	or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. If only a portion of an asset is sold, please so indicate (i.e., "partial sale"). See example below.	that resulted in a loss. Provide a brief description of any exchange transaction. Do not report a transaction between your spouse.	stocks, bonds, commodities futures, or other securities when the	Report any purchase, sale, or exchange by you, your spouse or dependent child during the reporting year of any real property,
			12-1														PURCH	\se [*]		Ty of Tran
			e Pe			**			9						×	克	SALE	IĞE.		Type of Transaction
															10-12-07		Monthly, or Bi-weekly, if applicable	Quarterly,		Date
						# July # 9# #*				19	3.5.34	e i w	1		X		\$1,001 \$15,000 \$15,001 \$50,000		6	
		e Alexanti	n se			1,074					j.	10.		12.	+		\$50,001- \$100,000 \$100,001-	,		Amou
144.519.4 107.257							-1			25 20 10 10 10	197			Ĺ			\$250,000 \$250,001, \$500,000 \$500,001-	e t	1	nt of Tra
	\$ 1.2 kg	147 14. 562				ester est		94		as (£.jl)							\$1,000,000 \$1,000,001 \$5,000,000 \$5,000,001			Amount of Transaction
				1 () () () () () () () () () (1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			3 <u>1</u> 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				•					\$25,000,000 \$25,000,000 \$50,000,000 Over \$50,000,000	0 ا- ا ا	1	

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Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report revolving charge accounts (i.e., credit cards) only if the balance at the close of the preceding calendar year exceeded \$10,000.

					SP, DC, JT
			None	Example:	
			re .	First Bank of Wilmington, Delaware	Creditor
		-		Mortgage on 123 Main St., Dover, Del.	Type of Liability
		1 21			\$1,001- 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
		114		×	\$50,000 \$50,001 \$100,000
			14 A. S.	1.	\$250,000 mount of \$500,001- 0
	1,11				\$5,000,001
9 9 1			(2) (4)		\$25,000,000 \$25,000,000 \$50,000,000 Over \$50,000,000

SCHEDULE VI— GIFTS

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her Report the source, a brief description, and the value of all gifts totalling more than \$305 received by you, your spouse, or a dependent child from any source during the year.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule.

relationship to you. Gifts with a value of \$122 or less need not be added towards the \$305 disclosure threshold.

 Source	Description
 Example: Mr. Joseph H. Smith, Anytown, Anystate	Silver Platter (determination on personal friendship received from Committee on Standards)
None	

Name
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Kim
16)

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SCHEDULE VII — TRAVEL PAYMENTS AND REIMBURSEMENTS

or were paid by you and reimbursed by the sponsor. the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were paid directly by the sponsor you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than \$305 received by

spouse or dependent child that is totally independent of his or her relationship to you. **Exclude:** Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a

Examples: |-woodrow wilson Juti Center Franklin Center for 6 lobel Bling Aug 12-17 Heritage tourdation E+ Change Roycroft Corporation Chicago Chamber of Commerce F21-3 Aug 26-29 Aug. 6-11 Date(s) DC - Berlin - DC DC-Beltmer-DC DC-Macio City-DC City of Departure—Destination— City of Return DC—Los Angeles—Cleveland DC-Chicago-DC Lodging? (Y/N z Food? z Was a Family Member Included? (Y/N) Z < Number of days not at sponsor's expense 100 C プックへ つっての 2 Days None

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Name Steve King

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organization, or any educational or other institution other than the United States.	proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any non profit organization, any labor	Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner,
---	---	---

Exclude: Positions listed on Schedule I; positions held in any religious, social, fraternal, or political entities; and positions solely of an honorary nature.

Position	Name of Organization
	non

SCHEDULE IX—AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

		,	 	
Date				
Parties To	rone_			
Terms of Agreement				